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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

			1			
Attorney Docket Number		00438-02	. '			
First Named Inventor		KOVATCHEV, Boris P.				
COMPL	ETE IF	KNOWN				
Application Number						
Filing Date	Febr	uary 22, 2002				
Art Unit						
Examiner Name						

As the below named inventor, I here	eby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
METHOD AND APPARATUS FOR PREDICTING THE RISK OF HYPOGLYCEMIA								
<u> </u>								
	(Title of the I	Invention)						
the specification of which								
is attached hereto								
OR _								
X was filed on (MM/DD/YYYY)	August 21, 2000	as United States A	pplication Number	or PCT International				
L		<u>/</u>						
Application Newsberg DOM/TIGO	/2200	ed on (MM/DD/YYYY)		(if and line to la)				
Application Number PCT/US00/	722886 and was amend	ed on (MM/DD/1111)		(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by								
<b>l</b>	any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is								
claimed.  Prior Foreign Application  Foreign Filing Date  Priority  Certified Copy Attached?								
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO				
Additional foreign application pur	nhara ara listad an a aunale	montal priority data cheet D	TO/SB/02B attach	ad harata:				

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## **DECLARATION** — Utility or Design Patent Application

	Direct all correspondence to: Customer Number or Bar Code Lab			OR [	X Corr	respondence address below		
	Name Robert J. DECKER, University of Virginia Patent Foundation							
	Address 1224 West Main Street, Suite 1-110							
	City Charlottesville		State VA			zip 22903 —		
	Country US / Tel	lephone 434-924	4-2640	_		Fax 434-924-2493	╝	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
, a a	NAME OF SOLE OR FIRST INVENTOR :	A petition h	nas beei	n filed for th	is unsigr	ned inventor		
22 <sup>1</sup>	Given Name (first and middle [if any]) Boris P.		Family or Surr	Name name <u>KOV</u>	ATCH	EV		
						02/06/2002 Date		
H. H. Worth Hans	Residence: City Amherst YA.	State VA	State VA Country US			Citizenship &G U.S.		
A The American	Mailing Address 121 Ridge Drive					<u> </u>		
4 4	City Amherst	State VA		ZIP 24521		Country US		
	NAME OF SECOND INVENTOR:	A petition ha	s been	filed for this	unsigne	ed inventor		
ภว	Given Name (first and middle [if any]) J. Randall  Family Name or Surname MOORMAN				1			
	Inventor's Signature Date 02/05/0					Date 02/05/02		
	Residence: City Charlottesville VA	State VA		Country US	5	Citizenship US		
	2275 Mechum Place Mailing Address							
			. [					
	City Charlottesville	State VA		ZIP 22901		Country US		
	$X$ Additional inventors are being named on the $1$ _s	upplemental Addition	onal Inver	ntor(s) sheet(s)	PTO/SB/	02A attached hereto.		

Please type a plus sign (+) inside this	s box —	+
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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet
Page 1 of 1

	Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor			
	Given Name (first and middle [if any])			Family Na	me or S	urname	
D	William L.	CLA	ARKE				
, 0	Inventor's Signature // // // // // // // // // // // // //	v				Date 2-5-1	
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Mailing Address 2064 Hawkshill Lane							
L. I. II.	Mailing Address	-1					
25 21 21	City Charlottesville	State VA		<b>ZIP</b> 22911	Countr	y US	
m .m	Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor			
G	Given Name (first and middle [if any])			Family Name or Surname			
A	Martin	S	STRAUME				
24. 24.	Inventor's Signature ( Manager			Date 02/04/			
had han han han	Residence: City Charlottesville YA.	State VA		Country US		Citizenship US /	
111.7 Marie	Mailing Address 3620 Glenaire Drive			· · · · · · · · · · · · · · · · · · ·			
#	Mailing Address	····					
	city Charlottesville	State VA		<b>ZIP</b> 22901	Cou	ntry US	
	Name of Additional Joint Inventor, if an	☐ A petition has been filed for this unsigned inventor					
	Given Name (first and middle [if any])			Family Name or Surname			
Inventor's Signature						Date	
	Residence: City State		Country			Citizenship	
	Mailing Address  Mailing Address						
	City State			ZIP	Co	untry	

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